

DCAP CHANGE IN STATUS FORM for FY____

cection 2 – Type of Transaction Change in Status which is on account of and consistent with the nature of the qualifying event must occur in order to change or current DCAP account. Requests to change your deduction amount or revoke your enrollment must be initiated within 60 day the qualifying event. Changes in Status indicated with an ** must be reviewed and approved by the FSA Unit on a case-by-case asis. You may contact the FSA Unit at 1-800-442-1300 if you have any questions. Increase in Deduction Amount Change in Status Code	ocial Security Number Last Name			 Initial
14 Spouse commences employment	Change in Status which is on account of and consistent with our current DCAP account. Requests to change your deduction the qualifying event. Changes in Status indicated with an '*'	n amoun must be	t or revoke your enrollment must reviewed and approved by the FS	be initiated within 60 day
18 Spouse changes employment status from Part-time to Full-time 21 Change in the cost of care 24 Coordination of spouse's annual benefit election period \$\] 19 Decrease in Deduction Amount Change in Status Code New Deduction Amount Per Pay Period \$\] 10 Decrease in Deduction Amount Change in Status Code New Deduction Amount Per Pay Period \$\] 10 Death of dependent * Ostation of dependent * Ostation of dependent * Ostation of dependent * Ostation of Enrollment Change in Status Code Ostation of Spouse's annual benefit election period Death of dependent decree or court order * Ostation of Enrollment Change in Status Code Ostation of Enrollment Ostation of Enrollment	Increase in Deduction Amount Change in Status Co	de	New Deduction Amoun	t Per Pay Period \$
3 Divorce, legal separation or annulment * 2 Change in the cost of care 2 Coordination of spouse's annual benefit election period 2 Change in the cost of care 2 Coordination of spouse's annual benefit election period 2 Coord	O2 Marriage O3 Divorce, legal separation or annulment *	18 21	Spouse changes employment status Change in the cost of care	
Death of dependent * Dependent becomes ineligible (e.g. age) Dudgment, decree or court order * Devendent becomes ineligible (e.g. age) Divorce, legal separation or annulment * Death of only dependent Death of only dependent Dependent becomes ineligible Dependen	Decrease in Deduction Amount Change in Status Co	de	New Deduction Amoun	t Per Pay Period \$
Death of dependent * Dependent becomes ineligible (e.g. age) Dudgment, decree or court order * Devendent becomes ineligible (e.g. age) Divorce, legal separation or annulment * Death of only dependent Death of only dependent Dependent becomes ineligible Dependen	O3 Divorce, legal separation or annulment *	17	Spouse changes employment status	from Full-time to Part-time
Revocation of Enrollment Change in Status Code Divorce, legal separation or annulment * Death of only dependent Dependent becomes ineligible Dependent becomes of absence Dependent becomes ineligible Dependent becomes of absence Dependent becomes ineligible Dependent becomes ineligible Dependent becomes of absence Dependent becomes ineligible Dependent becomes		21		
Revocation of Enrollment Change in Status Code Divorce, legal separation or annulment * Death of only dependent Divorce, legal separation or annulment * Dependent becomes ineligible Divorce, legal separation or annulment * Divorce, legal separation or absence * Divorce, legal separation of absence * Divorce legales or absence * Divorce legal	Dependent becomes ineligible (e.g. age)	24	Coordination of spouse's annual ber	nefit election period
Divorce, legal separation or annulment * Death of only dependent 19 Employee enters leave of absence 20 Spouse enters leave of absence 21 Change in the cost of care 22 Employee changes employment status from Full-time to Part-time less working than 50% Part-time less working than 50% Part-time less working than 50% Date	<u> </u>	nde		
Death of only dependent Death of only de				
Dependent becomes ineligible 20 Spouse enters leave of absence 21 Change in the cost of care 22 Employee changes employment status from Full-time to Part-time less working than 50% 24 Coordination of spouse's annual benefit election period Part-time less working than 50% Part-time less working in the cost of care Pa		-		
2 Sudgment, decree or court order *				
22 Employee changes employment status from Full-time to Part-time less working than 50% 22 Employee termination of employment, retirement or death 24				
Part-time less working than 50% 24 Coordination of spouse's annual benefit election period 25 Section 3 – Certification 26 Exercise that the above eligible change in status event occurred on			Č	nt ratirament or death
rertify that the above eligible change in status event occurred on		-		
				:/
TR Signature: Date:/	nployee Signature:			
		Group	o Insurance Representative	2)

Return the completed form to your Group Insurance Representative

• Forward the original to the FSA Unit at CMS and retain one copy of the form in the member's file.

INSTRUCTIONS